

## Closure Request Form for Trading and Demat Account

(To be filled by the BO. Please fill all the details in Block Letters in English)

**Application No.** \_\_\_\_\_ **Date:** \_\_\_\_\_ **Account to be closed:**  
**Trading**   
**Demat**

**Closure Initiated by**  **BO**  **DP**  **CDSL**

To,  
**M/s. Hem Securities Limited/ Hem Finlease Pvt. Ltd.,**  
**203, 215 Jaipur Tower, M.I. Road,**  
**Jaipur- 302001 Rajasthan.**

**DP ID: 1201770**

**Dear Sir/ Madam,**

I/ We the Sole Holder/ Joint Holders/ Guardian (in case of Minor)/ Clearing Member request you to close my/ our account with you from the date of this application. The details of my/ our account are given below:

**Account Holder's Details:**

<b>DP ID</b>	1	2	0	1	7	7	0		<b>Client ID</b>											
<b>Trading Code (BSE/ NSE CASH- F&amp;O) (A/c to be closed)</b>																				
Name of the First/ Sole Holder																				
Name of the Second Holder																				
Name of the Third Holder																				
Address for Correspondence																				
City										State										

**Details of remaining security balances in the account (if any):** (Please enclose as Annexure)

Reasons for Closing the Account																	
Balance remaining in the account (if any ) to be:																	
<input type="checkbox"/> Partly rematerialized and partly transferred										<input type="checkbox"/> Rematerialized							
<input type="checkbox"/> Transferred to another account (Number given below)										<input type="checkbox"/> Not applicable							
<b>DP ID</b>									<b>Client ID</b>								
Balance present in account for (To be filled by DP, if applicable)					<input type="checkbox"/> Ear – marked <input type="checkbox"/> Pending for Dematerialization <input type="checkbox"/> Pending for Rematerialization					<input type="checkbox"/> Pledged <input type="checkbox"/> Frozen <input type="checkbox"/> Lock-in							

**DECLARATION: In case of Account Closure due to SHIFTING OF ACCOUNT:**

I/ We declare and confirm that all the transactions in my/ our demat account are true/ authentic.

	First/ Sole Holder	Second Holder	Third Holder
Name			
Signature *			
Contact No. & E-Mail ID:			

\*If DP or CDSL initiates account closure, Signature(s) of account holder(s) not required.

===== (Please Tear Hear) =====

**Acknowledgement Receipt**

**Application No.** \_\_\_\_\_ **Date:** \_\_\_\_\_

We hereby acknowledge the receipt of your instruction for closing the following Account subject to verification:

<b>DP ID</b>	1	2	0	7	7	7	0		<b>Client ID</b>								
Name of the First/ Sole Holder																	
Name of the Second Holder																	
Name of the Third Holder																	
Reason for Closure																	

**Depository Participant Seal and Signature**

**Instructions to Account Holder (s)**

- Submit a duly-filled RRF if the balances are to be rematerialized.
- Submit a duly-filled Delivery Instruction Slip [DIS] (off market instruction slip) if the balances are to be transferred to another Account. This requirement is not applicable in the case of **"SHIFTING OF ACCOUNT."**
- Kindly ensure that all the dues are paid before filing application for Closure and all the stocks available in Pool Account are transferred to your respective Account.
- Kindly affix stamp along with the signature in case of Account of Proprietorship/ Partnership/ HUF/ Corporate/ Trust.